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CONFIRMATION NO. 9046

<b>SERIAL NUMBER</b> 10/687,503	<b>FILING OR 371(c) DATE</b> 10/15/2003 <b>RULE</b>	<b>CLASS</b> 227	<b>GROUP ART UNIT</b> 3721	<b>ATTORNEY DOCKET NO.</b> END-887CIP
<b>APPLICANTS</b> Kevin Doll, Mason, OH; Michael Earl Setser, Burlington, KY; Frederick E. Shelton IV, Hillsboro, OH; Kenneth Wales, Mason, OH;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/441,424 05/20/2003 PAT 7,044,352 ✓ <i>onw</i>				
<b>** FOREIGN APPLICATIONS *****</b> NONE ✓ <i>onw</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 01/17/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 27	<b>TOTAL CLAIMS</b> 22
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 000027777				
<b>TITLE</b> SURGICAL STAPLING INSTRUMENT HAVING A SINGLE LOCKOUT MECHANISM FOR PREVENTION OF FIRING				
<b>FILING FEE RECEIVED</b> 936	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	